

**CONFIRMATION / REQUEST FOR DISCLOSURE OF DEQ RECORDS****Under The Freedom Of Information Act**

(This information is required under Authority of Act 442, P. A. 1976 as amended in order to request public records information)

**ALL INFORMATION MUST BE TYPED OR PRINTED EXCEPT FOR WRITTEN SIGNATURES**

Company Name (If Applicable) Or Organization (If Any) <b>Ball Environmental Associates</b>			Business Phone # Area Code (231) 933-8400
Requester's Name <b>Natasha Lapinski</b>			Daytime Phone # Area Code ( )
Address (Street And Number) <b>232 E. Front Street, Suite 7</b>			Home Phone # Area Code ( )
City <b>Traverse City</b>	State <b>MI</b>	Zip Code <b>49684</b>	Social Security Or Federal Id No.

I wish to receive a copy of the following materials:  
(Provide detailed descriptions of materials being requested and specify number of copies needed of each) (Attach additional sheets if necessary)  
Any documents submitted after July 2001 for Williamsburg Receiving & Storage, 10190 Munro Road, Whitewater Township in Grand Traverse County.

DO-02-373

US EPA RECORDS CENTER REGION 5



523355

☐ I hereby request a waiver or reduction in fees as provided in Section 4(1) of F.O.I.A. because I am indigent or receive public assistance. (Attach proof)

I understand the DEQ may take 10 additional business days, if necessary, to fill my request due to the diverse locations or large volume of the material. I understand that if it is determined that some or all of the materials which I have requested to review or have copied may not be disclosed, I will receive a written denial including the reason for denial and explaining my right to appeal. I also understand that I may be charged with costs associated with this request.

Signature of Requester (If available) \_\_\_\_\_ Date \_\_\_\_\_

Please submit this completed confirmation / request to:

**WASTE MANAGEMENT DIVISION  
MICHIGAN DEPARTMENT ENVIRONMENTAL QUALITY  
120 W. Chapin Street  
Cadillac MI 49601**

TELEPHONE NO.: ( 231 ) 775-3960

FAX NO.: ( 231 ) 775-1551

**If you have any questions regarding this request, please contact:**

Division/Office Name <b>Waste Management Division</b>	Unit <b>Cadillac District Office</b>
DEQ Employee Name <b>Tammy L. Blaszk, FOIA Liaison</b>	Telephone No. Area Code ( 231 ) 775-3960 Extension 6702

Date this request was completed:  
04-04-02**FOR DEPARTMENT OF ENVIRONMENTAL QUALITY USE ONLY**

This section to be completed by the DEQ division/office employee fulfilling this request

<b>Detail of Charges</b>	<b>INDEX</b>
Labor \$ 4.95	33820
Labor \$	PCA 45501
Copying \$ 4.25	AGENCY OBJECT <b>8857</b>
Mailing \$ 3.65	PROJECT
<b>TOTAL \$ 12.85</b>	PHASE

**-THIS IS NOT A BILL-**

**You will be invoiced  
separately for any  
charges listed.**

## BALLENVIRONMENTALASSOCIATES

D6-02-373

April 1, 2002

FOIA Officer  
WMD  
Michigan Department of Environmental Quality  
120 W. Chapin. St  
Cadillac, MI 49601

**RE: FOIA request for documents related to Williamsburg Receiving and Storage, 10190 Munro Rd., Whitewater Township, Grand Traverse County, Michigan**

Dear Ms. Martin,

Per the Freedom of Information Act, I would like to request any documents submitted to your office after July 2001 for Williamsburg Receiving and Storage, 10190 Munro Rd., Whitewater Township in Grand Traverse County. This request is for the relevant documents from Waste Management Division. Please send copies of these documents to the below address.

If you have any questions regarding this request please contact me a (231)933-8400 or [bea@freeway.net](mailto:bea@freeway.net). Thank you.

Sincerely,  
Ball Environmental Associates, L.L.C.



Natasha Lapinski  
Biologist/Project Manager

File #1002-09

**BALL ENVIRONMENTAL ASSOCIATES, L.L.C.**  
232 E. Front St., Suite 7 Traverse City, Michigan 49684  
ph: 231.933.8400 fx:231.933.8406 [bea@freeway.net](mailto:bea@freeway.net)



## CONFIRMATION / REQUEST FOR DISCLOSURE OF DEQ RECORDS

## Under The Freedom Of Information Act

(This information is required under Authority of Act 442, P. A. 1976 as amended in order to request public records information)

ALL INFORMATION MUST BE TYPED OR PRINTED EXCEPT FOR WRITTEN SIGNATURES

Company Name (If Applicable) Or Organization (If Any) Ball Environmental Associates LLC			Business Phone # Area Code ( 213-256-7824)	
Requester's Name Christopher P. Grobbel			Daytime Phone # Area Code ( )	
Address (Street And Number) [REDACTED]			Home Phone # Area Code ( )	
City [REDACTED]	State [REDACTED]	Zip Code [REDACTED]	Social Security Or Federal Id No.	

I wish to ☐ examine ☒ receive a copy of the following materials:

(Provide detailed descriptions of materials being requested and specify number of copies needed of each) (Attach additional sheets if necessary)

Review files for Williamsburg Receiving &amp; Storage, Whitewater Twp., Grand Traverse County, Michigan on January 22, 2001.

*Copies of files as noted.***Exemption 6 redactions**☐ I hereby request a waiver or reduction in fees as provided in Section 4(1) of F.O.I.A. because I am indigent or receive public assistance. (Attach proof)

I understand the DEQ may take 10 additional business days, if necessary, to fill my request due to the diverse locations or large volume of the material. I understand that if it is determined that some or all of the materials which I have requested to review or have copied may not be disclosed, I will receive a written denial including the reason for denial and explaining my right to appeal. I also understand that I may be charged with costs associated with this request.

Signature of Requester (If available)

*Christopher P. Grobbel, PhD*

Date

*1/22/01*

Please submit this completed confirmation / request to:

WASTE MANAGEMENT DIVISION  
MICHIGAN DEPARTMENT ENVIRONMENTAL QUALITY  
120 W. Chapin Street  
Cadillac MI 49601

TELEPHONE NO.: ( 231 ) 775-3960

FAX NO.: ( 231 ) 775-1551

If you have any questions regarding this request, please contact:

Division/Office Name Waste Management Division	Unit Cadillac District Office
DEQ Employee Name Tammy L. Blaszk, FOIA Liaison	Telephone No. Area Code ( 231 ) 775-3960 Extension 6702

Date this request was completed:

January 17, 2001

## FOR DEPARTMENT OF ENVIRONMENTAL QUALITY USE ONLY

This section to be completed by the DEQ division/office employee fulfilling this request

<b>-THIS IS NOT A BILL-</b>  <b>You will be invoiced separately for any charges listed.</b>		<table border="1"><thead><tr><th colspan="2">Detail of Charges</th></tr></thead><tbody><tr><td>Labor</td><td>\$</td></tr><tr><td>Labor</td><td>\$</td></tr><tr><td>Copying</td><td>\$</td></tr><tr><td>Mailing</td><td>\$</td></tr><tr><td>TOTAL</td><td>\$</td></tr></tbody></table>	Detail of Charges		Labor	\$	Labor	\$	Copying	\$	Mailing	\$	TOTAL	\$	<table border="1"><tr><td>INDEX 33820</td></tr><tr><td>PCA 45501</td></tr><tr><td>AGENCY OBJECT 8857</td></tr><tr><td>PROJECT</td></tr><tr><td>PHASE</td></tr></table>	INDEX 33820	PCA 45501	AGENCY OBJECT 8857	PROJECT	PHASE
Detail of Charges																				
Labor	\$																			
Labor	\$																			
Copying	\$																			
Mailing	\$																			
TOTAL	\$																			
INDEX 33820																				
PCA 45501																				
AGENCY OBJECT 8857																				
PROJECT																				
PHASE																				





CONFIRMATI

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

/ REQUEST FOR DISCLOSURE OF EQ RECORDS  
Under The Freedom Of Information Act

(This information is required under Authority of Act 442, P. A. 1976 as amended in order to request public records information)

GT County

D6-00-33

## ALL INFORMATION MUST BE TYPED OR PRINTED EXCEPT FOR WRITTEN SIGNATURES

Company Name (If Applicable) Or Organization (If Any)	Business Phone #
	Area Code ( ) —
Requester's Name	Daytime Phone #
	Area Code ( ) —
Address (Street And Number)	Home Phone #
	Area Code ( )
City	Social Security Or Federal Id No.
	- -

I wish to ☐ examine ☐ receive a copy of the following materials:

(Provide detailed descriptions of materials being requested and specify number of copies needed of each) (Attach additional sheets if necessary)

Williamsburg Receiving & Storage  
10190 Munro Rd.  
White water Twp.  
Williamsburg MI

3/3/00 W. Janice H.'s help,  
came in & looked @  
file - flagged needed info -  
Made Copies &  
sent w/ him when  
he left.

No Charge. jcd  
3/3/00

☐ I hereby request a waiver or reduction in fees as provided in Section 4(1) of F.O.I.A. because I am indigent or receive public assistance. (Attach proof)

I understand the DEQ may take 10 additional business days, if necessary, to fill my request due to the diverse locations or large volume of the material. I understand that if it is determined that some or all of the materials which I have requested to review or have copied may not be disclosed, I will receive a written denial including the reason for denial and explaining my right to appeal. I also understand that I may be charged with costs associated with this request.

Signature of Requester (If available) \_\_\_\_\_ Date \_\_\_\_\_

Please submit this completed confirmation / request to:

Waste Management Division  
MICHIGAN DEPARTMENT ENVIRONMENTAL QUALITY  
120 W. Chapin Street  
Cadillac MI 49601

TELEPHONE NO.: ( 231 ) 775 — 3960

FAX NO.: ( 231 ) 775 — 1511

If you have any questions regarding this request, please contact:

Division/Office Name	Unit
WMD	Cadillac District Office
DEQ Employee Name	Telephone No.
J. Heuer	Area Code ( 231 ) 775 — 3960 ext 6203

Date this request was completed:

## FOR DEPARTMENT OF ENVIRONMENTAL QUALITY USE ONLY

This section to be completed by the DEQ division/office employee fulfilling this request

Detail of Charges		INDEX
Labor	\$	PCA
Labor	\$	AGENCY OBJECT
Copying	\$	8857
Mailing	\$	PROJECT
TOTAL	\$	PHASE

**-THIS IS NOT A BILL-**

You will be invoiced  
separately for any  
charges listed.